disabled people full rights as citizens to all the rights and benefits enjoyed by other citizens, including and especially the right not to be discriminated against in employment. This law was passed in 1991, and is certainly the most liberal and far-sighted legislation of any in the world. Few other countries have come anywhere near it. In Britain, for example, there have been attempts to pass a law which would make discrimination against disabled people in employment illegal, but so far these attempts have failed, because the Government argues it would be too expensive to implement.

Disability is a rights issue. But, and this is a big but, that does not automatically mean that disabled people are given rights under the law, as the example from Britain shows. We have to always keep in mind one vital point: in the history of the world it has always been the case that *rights are won, not given.* To quote from another American disabled activist:

> 'The whole history of the progress of human liberty shows that all concessions yet made to her claims have been born of earnest struggle. If there is no struggle there is no progress. . . . Power concedes nothing without demand. It never did and it never will.'
>
> Frederick Douglas (disabled activist)

In each country disabled people, like other minorities, have to struggle for their rights. No struggle, no progress. The "Americans with Disabilities Act" did not happen overnight because the President woke up one morning and thought it would be a nice idea. It was the culmination of years and years of organizing, lobbying, research into the economic implications, campaigning, strategizing, demonstrating and struggling - *by disabled people.* For example, one tactic they used was to get disabled people all over the country, in every state, to keep a discrimination diary for one day, and send it to their representative in Congress. Hundreds of thousands of these diaries flooded the offices of congressmen, all illustrating the degree of discrimination which disabled people faced in their everyday lives. It was initiatives like this, which took a lot of organization and a lot of work from a large number of committed people, which convinced Congress that things had to change. To gain recognition and rights requires immense effort. That is the way the world is.

And the struggle goes on, because legislation is the beginning, not the end of social action.

That is essentially what democracy is about: people doing the work to convince others that their cause is just. This work was done in the States by disabled people themselves. The story of how the "Americans with Disabilities Act" was achieved is the story of a transition from regarding disability as an individual, medical, charity issue to seeing it as a social and political rights issue.

That, unfortunately, is not the case in most other parts of the world. The Soviet Union, for

example, when it existed, despite its socialism viewed disability as a charity issue. There the view was that disabled people should be 'taken care of' in one of two ways: either they belonged in vast institutions cut off from society, or they should be given handouts (called pensions'), and told to stay at home and accept that they could never participate fully in production or social life. Now the Soviet Union has collapsed, but it will take years, perhaps generations, to change that view of disability, just as it did in the United States. Last summer I visited the Caucasian countries of Georgia, Armenia and Azerbaijan, all of which were formerly part of the Soviet Union, and I talked to many disabled people. They had one common theme in what they said: 'We want our rights'. But I soon realized that they were not talking about their rights as perceived by, for example, the "Americans with Disabilities Act". What they meant was that they wanted their 'pensions' back, which stopped when the Soviet Union collapsed. That was what they regarded as 'their rights'. They were stuck in the charity model. (The same is true, incidentally, of some of the few unions of disabled people that exist in Afghanistan, also influenced by Soviet policy.)

The examples of America and the Former Soviet Union illustrate the contrast between the social model and the individual/ charity model very graphically. As a way of making the contrast between these two models even clearer let me bring to your attention the examples of two cities, Budapest, capital of Romania, formerly a Communist country, and New York.

In Romania, under the Communist regime, if a child could not walk, he or she was not allowed, by law, to go to school. But in Budapest there is one of the most famous rehabilitation centers in the world, the Peto Institute. The Peto Institute is dedicated to enabling children with cerebral palsy to walk using an approach called "Conductive Education'. This requires highly trained therapists to work for long hours with individual CP children in a heroic attempt to get them onto their feet and walking. And they manage it, in some cases. If you go to the Peto Institute you will see gutsy young kids sweating and struggling to walk with crutches, and some of them are doing it. But, and this is a big 'but', if you arrive at the Peto Institute in a wheelchair you will find that you cannot get into the building through the front door because it has a flight of steps leading up to it. The only way in for you in a wheelchair is through the place round the back where they role the milk barrels into the kitchen. If you, still in your wheelchair, try to move around the city, you will find it impossible. No public buildings are accessible, and the pavement curbs are too high to allow you to even cross the street.

It is not surprising, therefore, that you do not see any disabled people in the streets, at least not in wheelchairs. They are stuck at home, trapped by a completely inaccessible environment. And so the Peto Institute tries to teach kids with CP to walk, so that they will not have to use wheelchairs, and so that they can go to school. But any improvement the Peto Institute can make in a child's ability to walk is usually temporary, because in most cases once the child grows up his or her weight is too much to handle on crutches and he or

she has to go back to a wheelchair.

The problem is that this is all based on the individual/ medical/ charity model of disability, which regards disabled people as needing a 'cure'. It is premised on the idea that if disabled people want to participate in mainstream life they have to function like mainstream people. They have to walk.

Contrast this with New York. Under the "Americans with Disabilities Act", public buildings and transport are required by law to be accessible. It will take a long time to make all buildings accessible, but even in the few years since the law was passed major changes are evident. Disabled people are visible on the streets because they can get around. Through physical changes in the environment they have access to society, and their isolation is being broken.

This is why it is so important to understand the difference between these two models. If a country bases its disability and rehabilitation policies on the individual/ medical/ charity model the result can never be integration of disabled people. The only way to integration is to understand and apply the social model, in which disabled people are seen as full citizens with rights enshrined in the law.

So I have illustrated the contrast by examples from the US and the former Communist countries. The rest of the world falls, as you might expect, mainly on the side of the charity model.

In developing countries there is much less emphasis on using the law to bring about changes in consciousness like this, for a whole variety of reasons, but mainly because the mechanisms to apply the law are lacking, and because the law is not seen as an instrument representing the people's will. In Afghanistan, as we shall see, there are other priorities entirely. But all development activities start in the mind and heart, with some kind of vision, and above all with values. Are there any indications that a different vision based on human values which see disabled people as truly equal are gaining ground in developing countries?

There are a number of things happening in developing countries which indicate a change in consciousness and value systems relating to disabled people.

The first is the introduction of CBR programmes. CBR, Community Based Rehabilitation, was conceived in the 1970's by WHO in parallel with the development of the concept of Primary Health Care. Primary Health Care was born from the attempt to provide a model of health care in developing countries much more appropriate to the circumstances of those countries. It replaced a model derived largely from the western model which was expensive and high-tech. In the same way, CBR is an attempt to make the rehabilitation of disabled

people more achievable in developing countries by using more appropriate, accessible and sustainable methods of rehabilitation.

The first thing to say about CBR is that it is rights based. Let me quote from the Introduction to the WHO CBR Manual:

> 'For rehabilitation to be successful, communities must recognize and accept that people with disabilities have the same rights as other human beings. This may require a significant change in attitude among the members of the community. It has been found that the most effective way of bringing about such a change in attitude is for members of the community themselves to take on the task of rehabilitation.'
>
> *'Training in the Community for Peotle with Disabilities*' E.Helander et al. WHO 1989, 1991.

It is all very well to talk about rights, and it is of course a major step forward to enact laws giving rights to disabled people. But unless practical action is taken in the context where people actually live, then the discussion about rights and the existence of laws mean nothing. CBR is a way of taking practical action at the local level.

CBR takes different forms in different countries, as it must, since each country has a different context, different social structure and different governmental system, but the form being implemented in Afghanistan by the UN and partner implementing NGOs, can be described quite simply.

It is based on the recruitment of field workers at village level, who have six main responsibilities:

(a) to identify through a survey the number of disabled people in their area;

(b) to integrate disabled children who can be integrated into schools;

(c) to develop home based training with the families of those who can be helped in this way;

(d) to seek out local craftsmen and women willing to take on disabled adults as apprentices for skill training;

(e) to refer those who need it to health and other services (if they exist);

(f) to mobilize volunteers and establish local CBR committees.

In addition the programme provides referral services such as orthopaedic workshops and physiotherapy.

Experience in Afghanistan, and many other developing countries, reveals that usually neglect of disabled people, especially children, is not the main problem; the problem is that parents love their disabled children but often simply do not know what to do to help them, and they tend to over-protect them, perhaps because they feel in some way guilty about having produced a disabled child in the first place. But with guidance from a CBR worker parents can learn more about child development, and about how their child can develop and grow.

It may not be possible for a child with cerebral palsy to walk, for example, but with the right knowledge in the house it is possible to dramatically improve the quality of life of a CP child. For example, if the child cannot support him or herself in a sitting position, a specially made corner chair will enable the child to sit up. Once they can sit up they can interact with the world in a different way from the interaction they have lying down, which is totally passive. It is these details which make all the difference to the development of the child, to his or her well being, to the morale of the other family members especially the mother, and therefore to the well being of the family. To make the corner seat means bringing a local carpenter into the process, which means he must meet the child, measure up, and learn something about disability and the needs of a disabled child. Once the child is sitting up and showing signs of development, relationships with other people outside the family will change. No longer is the child lying down, 'sick', but is active, interacting, learning. People begin to see the child as an individual, as a personality, as a person, not just as 'disabled'. This is the first step towards recognizing that he or she has rights.

The second encouraging sign from developing countries is what I would call the **empowerment model**. This is where disabled people themselves are taking matters into their own hands and mobilizing on their own behalf.

Let me give you an example from India.

India, as I am sure you are aware, has a traditional social structure which is based on the caste system, in which the human race is divided up into a hierarchy of categories from which a person can never escape during one lifetime. This means that in traditional Hindu belief people are not equal by birth, in fact they are inherently unequal. The caste system is now theoretically illegal, and in the cities the government claims that it is dying out, but in the villages it is still very much alive. The major social injustices in India derive from this caste system. Add to it also the position accorded to women in the Hindu texts, which makes them not just subordinate to but also inferior to men in all respects, and you have the basis for social injustice on a universal scale running right through the very foundation of Indian society.

However, against this inbuilt injustice is a counter tradition, illustrated by Mahatma Gandhi and others, for taking social action against injustice. People know how to mobilize to express their grievances, and they do mobilize. In a village there is the caste system, but there are also associations of people who are deprived in different ways: bonded laborers, landless laborers, women, 'dalits', people at the bottom of the hierarchy. These people mobilize and take action, at the village level, to claim their rights under the law.

Some years ago in the late eighties a blind person called Venkatesh, who up to that point had had a successful career in business, decided to work with his fellow disabled people and mobilize them around the issue of disability. As a blind person he travelled alone to villages and asked to meet with all the disabled people in that village. They would assemble, and assume that he, an educated man from the city, had something to offer them.

But he said: 'I have nothing to offer you. I have brought you nothing, no money, nothing.'

'So why have you come?' they asked.

'To hear about your problems,' he replied. 'Tell me about them.'

So they would tell him how difficult life was and how they met with discrimination in all aspects of their lives. So he would then say: 'And what do women, and bonded laborers, and landless laborers do when they face similar problems?'

'They form associations and take action.'

'So why do you not do the same?'

Out of these meetings grew the idea that disabled people, a deprived group, could take action on their own behalf. They formed associations. Through these associations they can get loans to set up small businesses, they support each other to get necessary appliances and other things that they need. But most of all through these associations they have discovered a new self-confidence, and a new respect in the eyes of their own community, because they are no longer playing the role of helpless victim, but are taking their own initiative to solve their own problems. Their own perceptions about themselves have changed, and so the perceptions of other people about them have changed. The change process started with them, just as it did with disabled people in the United States.

Now let us come to Afghanistan

In Afghanistan I have to say that it is easy to be discouraged. In the first place, I am not sure why we are talking about accessibility for disabled people when half the population, I mean

women, do not have access to what in other parts of the world would be regarded as an integrated social life, and when some present leaders specifically state that women should not be involved in social life at all. Such discrimination is absolutely contrary to UN conventions on human rights and equality which Afghanistan itself has signed. The most recent of these was the Declaration on the Occasion of the Fiftieth Anniversary of the United Nations, which reiterated the affirmation by the UN Charter of the equal rights of men and women. In this Declaration member states, including Afghanistan, committed themselves to strengthening the laws, policies and programmes that would ensure the full participation of women in all political, civil, economic, social and cultural life as equal partners, and the full realization of all human rights and fundamental freedoms for all women.

In short, it is a fundamental principle of the UN, enshrined in a number of conventions to which Afghanistan is a signatory, that gender equity is an absolute necessity for peace and sustainable human development.

I also perhaps hardly need to remind you that there is no justification whatever for such discrimination in any religious text, either Quran or Hadith. I would agree with Jinnah, the founder of Pakistan, when he said. 'The seclusion of women is a crime against humanity.'

If Afghanistan wants to be part of the modern world then it has to address the issue of accessibility for all human beings within its borders, not just for disabled people. I am aware that many Afghan men agree with this, and that there are voices being raised in favor of gender equality.

In the second place why are we talking about accessibility for disabled people when most of the population do not have access to basic education and basic health care, the two most fundamental pillars of any development process? In Kandahar province, for example, only 5 percent of boys and 1 percent of girls have access to primary education. The same is true of other provinces in the middle of the country. Where does accessibility for disabled people score on the priority list of a development planner in these provinces? Accessibility to what? To non-existent schools and defunct clinics? Where do you start?

You start with the fundamental concepts and basic human values. It may be that by focusing on the issue of disability we can start the process of thinking about rights, even though in the present context of a country at war these may seem irrelevant. Let me draw a parallel with Lebanon, which for seventeen years was consumed by a bitter and protracted civil war not unlike what is going on in Afghanistan.

In October 1987, at the height of the war in Lebanon, a group of about one hundred people in wheelchairs began a peace march from Tripoli in the north to try in the south, the entire length of the coast of Lebanon. They gathered supporters as they went, and moved through a

whole series of militia check posts marking the borders between the warring factions. The men at these check-posts were astonished to see a cavalcade of wheelchairs coming down the road, and did not know how to react. Even they could not shoot people in wheelchairs in cold blood. So they let them through.

Many of these disabled people had of course been disabled in the war, and the point they were making by this march was not actually one about disability at all: it was about the war. They were saying: 'No more war. War achieves nothing. Stop the fighting. We, people disabled by the war, are telling you this.' It was a simple but powerful message. Of course the fighting did not stop, then. It eventually stopped five years later. But they had made their mark. In the midst of all that killing they had, so to speak, stood up and said: 'Enough!' This was a courageous moral stand, and it earned disabled people new respect in Lebanon. It got disabled people noticed, it put them on the map. People suddenly realized that not only did they have something to say about which they felt passionately, but they were capable of saying it in a dramatic way. Their action represented basic human values which ordinary people strongly identified with. When the fighting did eventually stop, the disabled people who had led this march were invited by the new government to draft new social legislation, including rights for disabled people, which had not existed before.

The discussion on rights even for women, let alone for disabled people, has hardly started in Afghanistan. The discussion on rights generally faces enormous obstacles of ignorance and fear on the part of leaders. Even Mistiri will not raise the issue of women for fear of making his task more complicated. But I believe in candles. It is better to light a candle than curse the darkness. The peace march by disabled people in Lebanon was such a candle. The CBR programme in Afghanistan is such a candle. It is the first step in a very long process of getting people to think about fundamental human values, about the rights of all people in the country, whether male or female, disabled or not disabled.

Because the issue of gender equality is so important I just want to stress one aspect of the CBR programme which I believe to be very significant. It provides an opportunity to women for meaningful employment, which is different from the traditional income generating activities of keeping chickens and sewing, and to become trained in professions like physiotherapy and CBR field work. It provides an opportunity for mothers, deprived of learning outside the home, to learn about child development, to improve their literacy skills by reading a simple rehabilitation manual, to mix with other women and discuss common problems, to have, in a word, something approaching a normal life.

I am talking about access, in its widest sense.

Let me close with a poem by the nineteenth century American poet Walt Whitman, who himself was a fighter for just causes, a tireless campaigner, a man who believed that every

human being is intrinsically as valuable as any other:

> 'The earth does not argue,
> Is not pathetic, has no arrangements,
> Does not scream, haste, persuade,
> threaten, promise,
> Makes no discriminations, has no
> conceivable failures,
> Closes nothing, refuses nothing,
> Shuts none out.'
>
> Walt Whitman: *'A song of the rolling earth'*.

We have to make up our own minds about what kind of society we want. Do we want one which excludes, which makes discriminations, which shuts people out? Or do we want one which makes no discriminations, has no conceivable failures, closes nothing, refuses nothing, shuts none out?

The choice is ours. And we each have to take responsibility for making our choice happen.



Participants in a working group

ACCESSIBILITY FROM THE PERSPECTIVE OF DISABLED

A.

Mr. Ashraf Khan
Disabled Artist
Master Trainer
Solidarite Afghanistan Belgium - S.A. Belgium (ASYA)

Obviously the objective of the conference is the planning of a common strategy to coordinate activities being carried out by different organizations for the welfare of disabled persons. I, on behalf of disabled persons, would like to take this opportunity to draw your attention to the following points:

My friends! it is obvious that the number of disabled persons in Afghanistan is very high. They can play a valuable role in the reconstruction of the country provided the following points are taken into consideration:

ON GOVERNMENT LEVEL:
The Government must provide work opportunities in its related departments and legislate in a way which will guarantee their fundamental rights.

ON NGOs LEVEL:
NGOs should not only undertake training, educational or other projects for disabled persons, but they should also provide them the opportunity to actively participate in these projects. Centers for their physical and mental rehabilitation should be established.

All such activities could successfully be implemented if they are carried out with bonafide intentions and collectively. The community should be convinced that disabled persons are its essential part and they may even serve it better provided they are given respect, dignity and honor. I hope the above mentioned points are considered. I pray for your success.

INTRODUCTION

The Workshop on "Accessibility for Disabled Persons in Afghanistan" was organized by the ACBAR Disability Taskforce, based on an idea initiated by Mr. A. R. Sahak, President ADS, and former Chairman Disability Taskforce, who is himself a disabled Afghan.

The Disability Taskforce assigned members of the Organizing Committee with various tasks to prepare the agenda; to request funding; and to make all other arrangements, especially the selection of potential participants for the working groups and the inauguration session, etc.

The Workshop brought together participants representing professionals, implementors and donors to recommend practical, action-oriented measures to promote the concept of accessibility for disabled persons in Afghanistan.

A paper on 'Accessibility: *A Global Perspective*' was prepared by Mr. Peter Coleridge, Chief Technical Advisor, Comprehensive Disabled Afghans' Project and Chairman Disability Taskforce. Two disabled persons, Mr. Ashraf Khan and Mr. Aziz-ur-Rahman, with different types of disabilities presented their problems in terms of accessibility in Afghanistan.

Titles for the working groups were:

Physical Environment:
- to formulate strategies to improve the physical environment, including buildings (schools, hospitals, mosques, shops, offices, transportation, etc);

Services:
- to formulate strategies for access to services (schools, hospitals, vocational education, employment, etc.);

Recreation:
- to formulate strategies to improve physical facilities for recreation; and

Resources:
- to identify resources within communities and organizations.

Discussions in each group focused on problems, solutions, key actors and the verification of methodologies. A Chairperson and Reporter were assigned to each working group. See **Annex D for the agenda of the Workshop**.

Participants were selected by the Organizing Committee; a form was circulated asking participants to indicate which working group they wished to attend so as to enable the Organizing Committee to form the working groups in advance.

B.

Mr. Aziz-ur-Rahman
Wheelchair user
Afghan Disabled Society (ADS)

I am happy to be invited here to share my experience with regard to environmental inaccessibility for disabled persons and their effects.

To think deeply, accessibility to environment for a disabled person is as important as food and water for human beings. If standard norms and rules of accessibility to environment are not considered, disabled persons will not only be able to play a positive role in society, at the same time they will themselves be dependent bodies.

I always, like normal people, want to go to markets, the mosque, hospital, university and offices so as to make use of these facilities as equally as others do. Unfortunately, since I am a double amputee in a wheelchair, I experience problems due to lack of certain accessibility norms and rules. Doors to buildings are not wide enough and ramps do not exist. Therefore, the environment wherein I live makes me dependent and forces me to ask others for help.

As a matter of fact, I would, as normal people, like to benefit from schools, universities, hospitals, offices, restaurants, mosques, hotels, etc., but lack of accessibility prevents my movement. Therefore, there is a need for a change in all public, private and governmental buildings.

I can provide you with some good examples of improved building structures. I work as an instructor for the Paraplegic Center of the Pakistan Red Crescent Society. The building has the accessibility means, thus enabling me to work like normal people and serve my family.

Disabled visitors are able to move from one ward to another, to the dispensary, the laboratory, the dining room, the mosque, the X-Ray room, the workshop, the vocational training rooms and to the administration room very easily without any help from other persons. Disabled persons can open and close the doors themselves.

Another good example is the ADS office, where efforts have been made to make the building in such a way that disabled persons can move around without any problems.

I would like to strongly request that agencies involved in construction of buildings, consider accessibility norms and standards at the planning stage of construction activities. If accessibility is considered, I can assure you that all disabled, male and female, will participate in social work and will take a positive role in economic, cultural and social affairs.

In response to a question, the following main problems were mentioned by three disabled people present in the Workshop:

> Mr. Aziz said that he wanted to learn typing, but he could not go to the building. He wanted to learn English, but he was able to attend only the first level and he could not go to the second level because the class was on the second floor. As a disabled person, I tried my best to reach the building, but was unable to. Buildings should be constructed in such a way that disabled persons can utilize them.
>
> Another major problem included lack of community trust and respect. Disabled persons are not called by their names but referred to as deaf, blind, cripple, etc..

DISCUSSION GUIDE

Ms. Nancy H. Dupree
Senior Consultant
ACBAR

Ms. Nancy H. Dupree, the overall supervisor of the Workshop, explained the agenda and topics of each group. She urged the working groups to think practically and realistically and formulate recommendations for action.

To make the participants think in a practical way, the following suggestions were made to organize the discussions:

- **WHY** - the working groups are thinking about different aspects. Each group should identify and analyze the primary issues they want to address;

- **WHAT** - can be done about the issues identified? What are the objectives and purposes? The working groups should list what they think would be desired achievements and should make sure they are practical, attainable and realistic;

- **WHO** - is responsible for what? What are the human resources? Are they available? Do they need training? What mechanisms would the working groups suggest for involvement/motivation of policy makers, donors, NGOs, authorities and communities;

- **HOW** - the planning matrix. The working groups should make a plan/strategy, which is objective oriented. The plan should also include verification indicators; and

- **WHEN** - the time-span. The working groups should identify what should be met immediately. Some Quick Impact Projects (QIPs) and long term projects should be identified.

With the hope that the working groups come up with a few concise and practical recommendation, which was the objective of the Workshop, the participants were invited to start discussions in their relevant groups.



A group photo at the end of Workshop

OBJECTIVES OF THE WORKING GROUPS

After discussions by different working groups on the given topics, their conclusions were submitted to the plenary for general discussions. After a very lively debate the following objectives were summarized:

OVERALL OBJECTIVE UNDER DISCUSSION

living conditions for disabled persons are improved[1] in Afghanistan.

PURPOSE BY GROUP

- Physical environment becomes barrier-free for disabled persons in Afghanistan;
- Needed services are available for all disabled persons in Afghanistan;
- All recreation facilities are available for all disabled persons; and
- All resources are utilized for integration[2] of disabled persons.

OBJECTIVES BY GROUP

- Side-walks have access ways for disabled persons;
- Transport is accessible to disabled persons;
- Buildings are accessible for disabled persons;
- Roads and structures have means for an easy passage of disabled persons;
- Recreation parks are more accessible for disabled persons
- Families and community educated about disabled persons;
- All needs of all disabled persons identified;

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[1] improved = Dignified, integrated, sustainable, peaceful and independent

[2] INTEGRATION = Participation in all day to day activities

- Common services changed/expanded to include disabled persons;
- Gender balance of services provided;
- Special services provided for those who cannot receive common services (after all changes are made);
- Encourage events organized/attended by disabled together with able bodied persons;
- Disabled persons teams formed for indoor and outdoor games;
- Recreational opportunities identified;
- Disabled and abled groups mobilized to promote access to a widest possible opportunity to recreation;
- Support and cooperation with local leaders and authorities secured for the understanding of recreational activities;
- All services encouraged to incorporate recreational facilities within their programmes;
- Possibilities explored for using schools, clinics, mosques and madrasas for recreation;
- Interaction facilitated between disabled and school children to strengthen awareness;
- Recreational activities encouraged;
- Information disseminated on disabled through mass media, posters, booklet, brochures etc.;
- CBR is implemented in Afghanistan;
- Individuals and their families are trained to overcome the consequences of disability;

RECOMMENDATIONS

Taking account of the various objectives, the following recommendations were unanimously adopted:

FOR COMMUNITY:

- Contacts with communities should be established to take into account the needs of disabled;
- Communication should be encouraged between service providers, families, and disabled communities;
- Disabled children should be involved with other children through organizations like scouts and children to children programmes;
- More disabled groups should be formed and linked through better communication;

FOR SERVICE PROVIDERS:

- Plans should be made for the integration/expansion and change of common services to include/employ as many disabled as possible;
- Office for the employment of disabled persons should be created;
- Special employment quota should be created for disabled;

FOR ORGANIZATIONS:

- A needs assessment for disabled-oriented projects should be carried out;
- Resources in urban areas should be identified;
- Donor support for disabled-oriented project ideas should be secured;
- Projects to address the needs of disabled should be designed with community participation;

- [3]"Disabled Clause" should be included in all project documents;

- Construction specifications for accessible buildings and machinery should be included in health and education training programmes;

- Implementing agencies should undertake disabled-oriented project activities;

- Coordination between donors and implementors should take place on standards of physical access for disabled persons in Afghanistan;

- Monitoring should be undertaken for follow up;

GENERAL:

- Legislation should be developed to guarantee the right of disabled to have access to public services;

- Awareness campaigns should be conducted to educate and motivate families, communities, government and local authorities;

- Health services should be designed to limit congenital disabilities;

- Actions should be undertaken to prevent disability;

- Afghanistan should be demined; and

- Peace and stability should be promoted in Afghanistan.

FOR ACBAR

- A one day workshop to assess the progress in achieving the above objectives should be organized within the next 12 months;

- ACBAR to follow up the progress on the Workshop recommendations, where feasible;

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[3] DISABILITY CLAUSE:
- all structures are accessible for disabled persons
- tools and equipment meet safety standards to prevent disability

FROM ACBAR

- The above recommendations should be further discussed in the ACBAR Disability Taskforce meetings and a brief pamphlet prepared for dissemination to all authorities, donors and NGOs to gain the wide support for disabled and accessibility throughout Afghanistan;

- To find ways and means of implementing the Workshop recommendations, one or two recommendations should appear in the agenda of each Disability Taskforce meeting for discussion;

- The ACBAR Disability Taskforce should assign a "Working Group" for the follow-up of the recommendations;

- The Working Group should develop Terms of Reference and a detailed work plan to be submitted to the members of the Disability Taskforce for their approval; and

- The Working Group should establish contacts with different parties identified in the recommendations to encourage and motivate them to implement the recommendations.

CLOSING REMARKS

Mr. A. R. Sahak
President Afghan Disabled Society (ADS)
Ex-Chairman ACBAR Disability Taskforce

First of all I would like to thank you all for sparing your valuable time to attend this workshop.

As a matter of fact, it is impossible, in physical terms, to replace what disabled persons have lost. What at least could be done is to improve access to facilities and services so as to give the disabled persons a chance to participate on more equal terms in daily activities and contribute to the rehabilitation of their country.

We have to admit that physical accessibility is the most important aspect of integration, particularly, at this time, as NGOs are planning reconstruction/construction projects for Afghanistan. It is obvious that much of the country's infrastructure has been destroyed, thus needing rebuilding or reconstruction. Therefore, this is the right time to consider the problem of accessibility for disabled persons.

I should like to thank the participants of the working groups and members of the Workshop Organizing Committee for their valuable contribution. I congratulate you all for the recommendations you made, which are realistic and practical.

I hope these recommendations are implemented in the interest of disabled persons in Afghanistan.

WELCOME ADDRESS

Mr. Charles A. MacFadden
Executive Director
ACBAR

Commissioner of Afghan Refugees, Rustam Shah Mohmand, Country Representative NCA/NRC, Thor-Arne Prois, Peter Coleridge, Chairman of the Disability Taskforce, guests - I am delighted to welcome you to this Disability Workshop organized through the ACBAR Disability Taskforce.

ACBAR was established in 1988 - and since that time we believe that ACBAR has made a useful contribution in the field of coordination, and especially in sectoral coordination. One of these Sub-committees, the Disability Taskforce has been very successful since it started. It has provided a forum for agencies to raise the profile of the disabled both among the refugee populations and those in Afghanistan. Sadly we all know that the numbers of disabled are very large - an unduly high percentage of the total population of Afghans is suffering from one type or other of disability. It is critical that efforts are made to improve the lifestyles of this number. And sadly given the Afghan situation, disability does not generate the same amount of interest given to other sectors.

However, we should be doing something now on this issue before it is too late. Many of the disabled are suffering as a result of the chaos that Afghanistan has been through for the last 18 years, others are suffering as a result of a failure in health or education, etc.. In fact many of those disabled are victims of something totally outside their control. We cannot effectively say we are helping Afghans without doing something for these people too. We must also note that much work has been achieved through the work of some agencies - and we must congratulate them and their staff for their vision and achievements. The continued support by donors to disability programmes is much appreciated by all and it is hoped that donors will pay increasing attention to the needs.

As with everywhere, the vulnerable need some help. We must give them their respect back, we should make it possible for as many as possible to lead a normal life on their own. We should undertake programmes that will treat all people as equals.

I hope the Workshop over the next two days will help establish some framework under which efforts can be coordinated better for a new approach to making life a little better for the disabled

ANNEX A:

WORKSHOP ORGANIZING COMMITTEE

- Mr. Peter Coleridge (**Chairman**)	CDAP/UNOPS
- Mr. A. R. Sahak	ADS
- Ms. Nancy H. Dupree	ACBAR/ARIC
- Ms. Veslemoy Naerland	UNHCR
- Ms. Zahida Shaheen	UNHCR
- Mr. Ghulam Gul	A. S. Belgium (ASYA)
- Shafiq Ahmad	ACBAR

ANNEX B:

PARTICIPANTS OF THE INAUGURATION SESSION

- Peter Coleridge	CDAP	- Abdul Wajid Adil	SAVE
- John Barden	IRC	- Carl Erik Wiberg	SCA
- S. Jawed	HAFO	- Azizullah	OV
- Hakim Gul	ESAR	- Sean Mc Quade	DACAAR
- Eng. Khair Mohammad	IMC	- Eng. Faizi	DACAAR
- Sarwar Hosaini	CCA	- Arch. M. Humayun	DACAAR
- Dr. Habibullah Farahmand	CBR	- Mohammad Mustafa	LBI
- Dr. Abdul Q. Samin	CoAR	- Abdul Qadir Adam	LBI
- M. Ashraf Anzurgar	Disabled Artist	- Arch. Latify	MARUF
- Ghulam Gul	S.A. Belgium	- Dr. Humayun	ARCAR
- M. Arif	MDC	- Naik Mohammad	AITM
- Ghulam Siddiq	SERVE/SSBA	- A. Seyar Zafar	MRCA
- Azizur Rahman	ADS	- Homa Salei	UNICEF
- Rahmanullah	SERVE/SSBA	- Attiqullah	MCPA
- M. Yousuf	SERVE	- M. Yousuf Rahmanzai	ACLU
- Hayatullah	SERVE/SSBA	- Kefayatullah	ATC
- Tajuddin	CDAP/SERVE	- Dr. Qazizada	HAF
- Mohd. Azim	RBTU	- Suraya	BBC
- Shad Khattak	SGAA	- Nazira	BBC
- M. Hashem Rahim	RBTU	- Jon Rothenberg	UNHCR
- Dr. Reha	ANCB	- Micheal Hirth	GTZ/BEFARe
- Zahida Shaheen	UNHCR	- Yousuf Nuristani	GTZ/BEFARe
- Dr. Mirza Jan	ISRA	- Farooq Wardak	SCA
- A. Aziz	ISRA	- Rafaat Ludin	AREA
- Jamila Akbarzai	AWWD	- Thor-Arne Prois	NCA/NRC
- Eng. Amir Mohammad	RAFA	- Charles A MacFadden	ACBAR
- Veslemoy Naerland	UNHCR	- Nancy H. Dupree	ACBAR/ARIC
- Ali Gohar	SWC/CAR	- Liz Spencer	ACBAR
- M. Alam	NPO/RRAA	- Naqib A. Noory	ACBAR
- Maliha Danish	UNDCP	- Jawed Ludin	ACBAR
- Dr. Faiza Zara	UNOPS	- Mohammad Zakir	ACBAR
- M. Siddiq Sallek	NCA/NRC	- Nurullah Saifi	MADERA
- Shafiq Ahmad Qarizada	ACBAR	- Shir Aqa	MADERA

ANNEX C:

PARTICIPANTS OF THE FOUR WORKING GROUPS

Group I: **Physical Environment**

- Arch. A. Hasib Latify (**Chairman**)	MARUF
- Rafaat Ludin (**Reporter**)	AREA
- A. R. Sahak	ADS
- Eng. Amir Mohammad	RAFA
- Eng. M. Yousuf Rahmanzai	ACLU
- Abdul Wajid Adil	SAVE
- Dr. Habibullah Farahmand	CBR
- Dr. Qazizada	HAF

Group II: **Services**

- Maliha Danish (**Chairperson**)	UNDCP
- Jon Rothenberg (**Reporter**)	UNHCR
- Jamila Akbarzai	AWWD
- Dr. Faiza Zara	UNOPS
- Sarwar Hosaini	CCA
- Ghulam Siddiq	SERVE
- Mohammad Alam	NPO/RRAA
- Dr. Abdul Q. Samin	CoAR

Group III: Recreation

- Tajuddin (**Chairman**)	CDAP
- Zahida Shaheen (**Reporter**)	UNHCR
- Ghulam Gul	S.A. Belgium ASYA
- Eng. Khair Mohd.	IMC
- Shad Khattak	SGAA
- Rahmanullah	SSBA
- Veslemoy Naerland	UNHCR
- M. Yousuf	SERVE

Group IV: **Resources**

- Hashim Raheen (**Chairman**)	RBTU
- Homa Sabri (**Reporter**)	UNICEF
- Naik Mohammad	AITM
- Dr. Esmatullah	NAC
- M. Siddiq Salek	NCA/NRC
- Mohd. Azim	RBTU
- Ali Gohar	SWC/CAR
- Dr. Mirza Jan	ISRA
- Peter Coleridge	CDAP

ANNEX D:

WORKSHOP AGENDA

Day (I)

Inaugural Session

- Recitation from the Holy Qur'an
- Welcome address by Charles A. MacFadden, Executive Director ACBAR
- Chief Guest Address by Mr. Rustam Shah Mohmand, Commissioner for Afghan Refugees
- Key Note Address by Mr. Thor-Arne Prois, Country Representative, NCA/NRC

Paper No I

- 'Accessibility: A Global Perspective'
  Mr. Peter Coleridge
  Chief Technical Advisor
  Comprehensive Disabled Afghans' Project
- Discussions from the floor on paper.

Paper No II

Accessibility from the perspective of disabled persons:

a) Mr. Ashraf Khan
   Master Trainer S.A. Belgium (ASYA)

b) Mr. Aziz-ur-Rahman
   ADS

- Discussion from the floor

- Introduction (explain working groups)
  Ms. Nancy H. Dupree
  Senior Consultant ACBAR

- Questions from the floor on working groups

- Working Group - Session I

Day (II)

- Working Group - Session II

- Group Work to prepare recommendations

- Presentation of suggested recommendations to plenary by chairpersons

CONCLUDING PLENARY SESSION

- Discussion and adoption of recommendations by the plenary group

- Closing remarks, by A. R. Sahak, Ex-Chairman Disability Taskforce and President ADS

- I am sure many of the disabled, given their incredible resilience and stoicism to such problems, will both help themselves and help others in the same position.

Finally, I would like to express ACBAR's gratitude to NCA/NRC for their much appreciated support to fund this workshop - Thor-Arne has been a special friend to ACBAR since his time here and I would very much like to acknowledge that again today; I would also want to appreciate Rustam Shah's continued support for Afghanistan and the NGO community - we desperately need this at this time and in the future and we remain very grateful.



ADDRESS BY CHIEF GUEST

Mr. Rustam Shah Mohmand
Commissioner Afghan Refugees
NWFP

I am pleased to be here on the occasion of the inauguration of the ACBAR Disability Taskforce Workshop. I am sure the deliberations of the conference would go a long way in identifying the problems and seeking solutions to some of the more urgent ones.

At the end of every major conflict, the societies and nations have to grapple with the problem of looking after the large number of men and women and children who have been crippled, maimed or have suffered some sort of disability. They are not only remnants of a human tragedy but also a grim reminder of the extent to which human beings can go in inflicting the worst type of damage on their fellow human beings. Conflicts always tend to bring out the best as well as the worst in human beings. Motivated by nobler instincts man can attain heights of glory and can be a blessing to other creatures. Driven by meaner impulses he can be worse than beasts and can spell disaster for other human beings.

At the end of World War II, the people of the world had to contend with a large number of disabled men and women and there was a global effort to find them a place of dignity in society. We have such a problem locally in that hundreds of thousands of Afghans have become disabled due to the long conflicts in Afghanistan. Unfortunately the conflict in one form or the other continues to this day. And more and more people are becoming disabled. On the one hand the number of disabled persons is increasing, on the other hand the war ravaged country does not have the resources to come to the rescue and help of those who need assistance of others.

Any disability has social and economic implications. The society owes it to a disabled person to take him or her out of the dependency syndrome. Many disabled persons have been treated and cured; others have been trained to lead an independent life by utilizing their skills and training. These can be no better service to humanity than to treat or train the disabled to enable them to live an honorable and decent life and at the same time to contribute to the growth of the society and economy.

In this context the effort undertaken by ACBAR and other organizations are particularly welcome. I hope that there will be consistency in these endeavors and that the well to do people

would come forward and assist actively those who are involved looking after the disabled.

These of us who are lucky to have been blessed with sound and good health, take our health and systems for granted and do not realize what it means to be dependant on others or when some part of our body is not functioning. Such people who have ended up being disabled look up to us and the society as a whole to come to their help. Let us all join hands in this grand effort to help the disabled, and strengthen our belief in the finer values of humanity. For these fortunate people who are participating in such efforts, there could be no greater reward than their own contentment. They are always at peace with themselves and are the true servants of humanity.

And such service is best rendered when it transcends the boundaries of race, color, religion of geography.

There is a tradition of the Holy Prophet (Peace be upon him) which says that all human beings are like members of the household of God. Those who serve humanity actually serve God.

My congratulations once again to the organizers and to Charles MacFadden and Nancy Dupree for arranging this function and drawing attention to a great human problems.

KEYNOTE ADDRESS

Mr. Thor-Arne Prois
Country Representative
Norwegian Church Aid/Norwegian Refugee Council (NCA/NRC)

Commissioner of Afghan Refugees, Mr. Rustam Shah Mohmand, Executive Director ACBAR, Mr. Charles MacFadden, Ladies and Gentlemen.

It is a privilege for me, on behalf of Norwegian Church Aid and Norwegian Refugee Council, to address this opening session of this workshop, arranged by the ACBAR Disability Taskforce. Further it is a great privilege for us in NCA/NRC to be in a position to fund this workshop, a workshop and a topic we find of great importance.

It is a fact that in Afghanistan there is a vast number of disabled. Not only are there disabled who have lost limbs because of mines and fighting, but there is a large number of other disabilities caused by diseases and bad living conditions. And it is a sad and unfortunate fact that the present situation will create even more disabled in Afghanistan in the future.

We know that the disabled in general is a most vulnerable group. Ways and means of survival are difficult enough for able bodied people in Afghanistan. For disabled it is extremely difficult, if not impossible, unless they are supported and assisted in creating environments in which they can function.

There are different reasons for their difficult situation:

- In general there is a lack of jobs. Consequently priority is not given to disabled;

- Very often the accessibility for the disabled is limited. This is not only because of the physical conditions, which in many cases are a serious obstacle for the disabled to function and be a possible candidate for a job or contributor to their community. Inaccessibility is not only a matter of physical conditions. The society's attitudes might be an even worse obstacle to enable them to function to their maximum potential. Accessibility is the theme for this workshop. I do hope you will discuss it in this perspective;

- The basic problem is, in my opinion, the attitude towards the disabled, and the awareness of their situation. In Afghanistan, as in many other places in the world,

the attitude seems to be that being disabled means being somewhat mentally set back. If you lose a limb, your sight or hearing ability, you also, somehow, lose your mind. Consequently the attitude is often that disabled are helpless, and need help the way small children need help. This creates a variety of assistance that creates dependence rather than self-reliance, low self-esteem rather than confidence in own possibilities and strengths;

- For NCA/NRC Afghanistan Program disabled are a priority group. We support various projects aimed at creating jobs and income, and other ways of assisting them to become self-reliant and useful in their communities. In addition we are happy to have the opportunity to support them through a workshop like this, where NGOs, UN agencies and others can come together and discuss the problems, and together try to find ways and means to improve their situation. Our wish for the ultimate outcome of this workshop is as follows:

1. The raised awareness among NGOs, UN agencies, authorities in Afghanistan and others about the problems and constraints faced by the disabled in Afghanistan. This awareness should result in infrastructure projects that consider also the accessibility for the disabled, and an openness to employ and include the disabled in the society;

2. The start of a process for a change of attitude towards the disabled, to consider them what they are, an important resource for their communities, provided conditions are created in which they might have the possibility to function;

3. The start of a dialogue with the disabled themselves and their organizations;

4. A plan on how, from here, to continue the task of supporting the disabled to get better access to their community. This task can never be finished here. And this workshop can only be a first short step in the process and work, that will take time and patience. So there is a need for commitment from the participants to continue their efforts after this workshop.

The Executive Director of ACBAR Mr. Charles MacFadden was kind enough to thank me and NCA/NRC for our support to this workshop. I will have to pass on that gratitude to my Government, the Royal Ministry of Foreign Affairs in Norway, being our donor, for their generosity and flexibility, allowing us to spend money and resources on important workshops like this one.

I hope you will have a useful workshop, and even more that you will increase your efforts and improve your ability to support and work with the disabled as a result of it.

ACCESSIBILITY: A GLOBAL PERSPECTIVE

Peter Coleridge
Chief Technical Advisor,
Comprehensive Disabled Afghans' Project
Chairman Disability Taskforce

I have been asked to speak about 'Accessibility: a global perspective'. What I would like to do is try to situate Afghanistan within a global context of activity and thinking around the issue of disability. I will interpret the word *accessibility* in the widest sense.

I think first we need to establish some basic concepts. The first is the difference between the **medical model** of disability and the **social model**.

The medical model (also called the charity model and the individual model) sees the problem of disability as originating in the disabled person. The disabled person cannot do the things that would enable him or her to lead a normal life. He or she cannot walk, cannot see, cannot hear, cannot go up steps, has fits, is always depressed and self-pitying, is sick. In the medical model it is the individual who is disabled by his or her impairment.

The social model turns the argument around and says the impairment itself need not prevent the individual from participating in mainstream life. The problem of disability is caused by society which does not accept someone with an impairment. So it is not the impairment but things like badly designed buildings, no jobs, segregated education, inaccessible transport, no facilities for sign language at public meetings, prejudice, and social isolation which create the problem of disability. It is society which disables, not the impairment. If someone has an impairment but is accepted by society and is able to mix freely and enjoy what other people enjoy, then that person is not disabled.

Understanding the concept of the social model is crucial when we come to consider the question of accessibility. Accessibility to what? To society of course. If we regard accessibility simply as a matter of putting ramps in buildings and having disabled children in schools then we have completely missed the point. Of course ramps and other aids are extremely important, but the business of accessibility starts in the hearts and minds of people, of you and me. How accessible are we? What are our own attitudes towards disabled people?

Throughout this talk I want to focus on the social model and contrast it with the charity/individual/medical model.

Disability is a social problem rather than an individual plight. If we understand this we are led naturally into the next concept, which is that disability is not a charity issue, it is a **rights issue.**

Let us consider, by way of illustration, what has happened in the west, especially in the USA, in this respect. Nowadays the USA has the most progressive legislation in the world relating to disabled people, but it was not always so. As recently as the beginning of this century disabled people were regarded *in the law* in the United States as sub-human. To quote a writer on disability discrimination law in America:

> 'At the beginning of this century individuals were deemed unfit for citizenship under Mississippi law; children with disabilities were deemed unfit for companionship with other children under Washington law; individuals with severe impairments were considered to be anti-social beings as well as a defect which wounds our citizenry a thousand times more than any plague. They were denied the right to serve on juries, to hold public office, to marry, to work in certain occupations, to attend public school, or even to be seen in the street.'
>
> Timothy Cook: '*Disability Discrimination Law in the United States, Canada and Australia.*'

At the turn of the century people in America and elsewhere were much influenced by Darwin's work on evolution and the concept of the 'survival of the fittest'. There grew up a philosophy around what was called 'eugenics'. This advocated helping the natural process of evolution along and improving the human race more quickly by eliminating defectives, that is disabled people. Later in the century Hitler became the most notorious person to actually put this philosophy into practice, and during the Third Reich hundreds of thousands of disabled people were systematically killed; doctors who knew exactly what they were doing signed the order for people from institutions to be quietly 'taken away', never to be seen again.

Still today in many countries in the west including America a disabled person may not be a priest in the church because the Old Testament speaks of a priest having to be 'without blemish'. This is true in both Catholic and Protestant churches.

But there has been progress. There is now a law in the United States called the "Americans with Disabilities Act", which recognizes that disability is a rights issue, and which gives

ACBAR

DISABILITY TASKFORCE WORKSHOP

ACCESSIBILITY FOR DISABLED PERSONS IN AFGHANISTAN



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MAY 1996

FOREWORD

ACBAR is delighted to make available the report of a two-day workshop on 'Accessibility for Disabled Persons in Afghanistan' - held on 26 and 27 March 1996 at the Pearl Continental Hotel in Peshawar.

ACBAR would especially like to thank the Norwegian Church Aid/ Norwegian Refugee Council (NCA/NRC) for their financial support to the Workshop. Without their generous support this Workshop would not have been possible.

We would also like to thank:

- Members of the Workshop Organizing Committee **(see Annex A)**, who were responsible for the overall management of the Workshop. They spent a great deal of time and effort in setting up and managing the Workshop;

- Mr. Peter Coleridge, Chief Technical Advisor, Comprehensive Disabled Afghans Project (CDAP) and Chairman of the ACBAR Disability Taskforce, for the preparation of the main paper for the Workshop "Accessibility: A Global Perspective", which helped focus the meeting and provided valuable guidelines to the working Groups;

- Mr. A. R. Sahak, President ADS and former Chairman of the Disability Taskforce, for initiating the Workshop;

- Ms. Nancy H. Dupree, Senior Consultant ACBAR, for undertaking much work for the meeting and acting as the overall supervisor of the Workshop;

- Mr. Rafaat Ludin, Director AREA, and Mr. Jon Rothenberg, Program Officer UNHCR Peshawar, for their role as Chairpersons of the Plenary Session;

- Participants of the Inauguration session **(see Annex B)**;

- Participants of the working Groups **(see Annex C)**;

- Staff of the Pearl Continental, particularly, Mr. Saqeb Lone, Executive Assistant Manager, for their efforts in making all necessary hotel arrangements; and

- Mr. Shafiq Ahmad, Senior Program Officer ACBAR, for preparing this report.

Charles A. MacFadden
Executive Director, ACBAR

CONTENTS